

12/30/99 Jc682 U.S. PTO

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	GEMS:0074 15-GS-5362	Total Pages	67
	First Named Inventor or Application Identifier Gopal B. Avinash			
	Express Mail Label No.	EL 432 941 845 US		

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification Total Pages <u>30</u> (preferred arrangement set forth below) -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <u>11</u> Total Pages <u>33</u>	ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other
4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) unsigned b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____	

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below				
(Insert Customer No. or Attach bar code label here)					
NAME	Patrick S. Yoder Fletcher, Yoder & Van Someren				
ADDRESS	P.O. Box 692289				
CITY	Houston	STATE	Texas	ZIP CODE	77269-2289
COUNTRY	USA	TELEPHONE	(281) 970-4545	Fax	(281) 970-4503

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL		Complete if Known	
		Application Number	Unassigned
		Filing Date	Herewith
		First Named Inventor	Gopal B. Avinash
		Group Art Unit	Unknown
		Examiner Name	Unknown
TOTAL AMOUNT OF PAYMENT	(\$) 1,258.00	Attorney Docket Number	GEMS:0074/15-SG-5362

<p style="text-align: center;">METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <u>07-0845/GEMS:0074/15-SG-5362</u></p> <p>Deposit Account Name: <u>GE Medical Systems</u></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center;">FEE CALCULATION (fees effective 10/01/96)</p> <p>1. FILING FEE</p> <table style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>790</td> <td>201</td> <td>395</td> <td>Utility filing fee</td> <td>760.00</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> <td>_____</td> </tr> <tr> <td>107</td> <td>540</td> <td>207</td> <td>270</td> <td>Plant filing fee</td> <td>_____</td> </tr> <tr> <td>108</td> <td>790</td> <td>208</td> <td>395</td> <td>Reissue filing fee</td> <td>_____</td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td>_____</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$) 760.00</td> </tr> </tbody> </table> <p>2. CLAIMS</p> <table style="width: 100%;"> <thead> <tr> <th></th> <th>Extra</th> <th>Fee from below</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims 39 - 20 =</td> <td>19</td> <td>X</td> <td>18.00</td> <td>= 342.00</td> </tr> <tr> <td>Independent Claims 5 - 3 =</td> <td>2</td> <td>X</td> <td>78.00</td> <td>= 156.00</td> </tr> <tr> <td>Multiple Dependent Claims _____</td> <td>X</td> <td>_____</td> <td></td> <td>= _____</td> </tr> </tbody> </table> <table style="width: 100%;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>11</td> <td>Claims in excess of 20</td> <td>_____</td> </tr> <tr> <td>102</td> <td>78</td> <td>202</td> <td>41</td> <td>Independent claims in excess of 3</td> <td>_____</td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependent claim</td> <td>_____</td> </tr> <tr> <td>109</td> <td>82</td> <td>209</td> <td>41</td> <td>Reissue independent claims over original patent</td> <td>_____</td> </tr> <tr> <td>110</td> <td>22</td> <td>210</td> <td>11</td> <td>Reissue claims in excess of 20 and over original patent</td> <td>_____</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> <td>(\$) 498.00</td> </tr> </tbody> </table>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	101	790	201	395	Utility filing fee	760.00	106	330	206	165	Design filing fee	_____	107	540	207	270	Plant filing fee	_____	108	790	208	395	Reissue filing fee	_____	114	150	214	75	Provisional filing fee	_____	SUBTOTAL (1)					(\$) 760.00		Extra	Fee from below		Fee Paid	Total Claims 39 - 20 =	19	X	18.00	= 342.00	Independent Claims 5 - 3 =	2	X	78.00	= 156.00	Multiple Dependent Claims _____	X	_____		= _____	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	103	18	203	11	Claims in excess of 20	_____	102	78	202	41	Independent claims in excess of 3	_____	104	270	204	135	Multiple dependent claim	_____	109	82	209	41	Reissue independent claims over original patent	_____	110	22	210	11	Reissue claims in excess of 20 and over original patent	_____	SUBTOTAL (2)					(\$) 498.00	<p style="text-align: center;">FEE CALCULATION (continued)</p> <p>3. 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late filing fee or oath	_____	127	50	227	25	Surcharge - late provisional filing or cover sheet.	_____	139	130	139	130	Non-English specification	_____	147	2,520	147	2,520	For filing a request for reexamination	_____	112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____	115	110	215	55	Extension for response within first month	_____	116	400	216	200	Extension for response within second month	_____	117	950	217	475	Extension for response within third month	_____	118	1,570	218	755	Extension for response within fourth month	_____	119	310	219	155	Notice of Appeal	_____	120	310	220	155	Filing a brief in support of an appeal	_____	121	270	221	135	Request for oral hearing	_____	138	1,510	138	1,510	Petition to institute a public use proceeding	_____	140	110	240	55	Petition to revive unavoidably abandoned application	_____	141	1,320	241	660	Petition to revive unintentionally abandoned application	_____	142	1,320	242	660	Utility issue fee (or reissue)	_____	143	450	243	225	Design issue fee	_____	144	670	244	335	Plant issue fee	_____	122	130	122	130	Petitions to the Commissioner	_____	123	50	123	50	Petitions related to provisional applications	_____	126	240	126	240	Submission of Information Disclosure Stmt	_____	581	40	581	40	Recording each patent assignment per property (times number of properties)	_____	146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	_____	149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	_____	Other fee (specify) _____					_____	Other fee (specify) _____					_____	SUBTOTAL (3)					(\$) 0.00
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SUBMITTED BY

Complete (if applicable)

Typed or Printed Name Patrick S. Yoder

Reg. Number 37,479

Signature

Date

December 30, 1999

Deposit Acct. User ID

07-0845/GEMS:0074/15-SG-5362